

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

09/9/9, 069

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

1/29/01

CLAIMS AS AMENDED - PART II

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 1)	(Column 2)	(Column 3)
	Total	26	Minus	28	=			
	Independent	3	Minus	4	=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 1)	(Column 2)	(Column 3)
	Total	*	Minus	**	=			
	Independent	*	Minus	***	=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	(Column 1)	(Column 2)	(Column 3)
	Total	*	Minus	**	=			
	Independent	*	Minus	***	=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								

SMALL ENTITY  
TYPE

RATE	FEES
BASIC FEE	150.00
OR	
X\$ 25=	
X100=	
+180=	
TOTAL	

OTHER THAN  
OR SMALL ENTITY

RATE	FEES
BASIC FEE	300.00
OR	
X\$50=	
X200=	
+360=	
TOTAL	

OTHER THAN  
SMALL ENTITY OR SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 25=	
X100=	
+180=	
TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE
X\$50=	
X200=	
+360=	
TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE
X\$50=	
X200=	
+360=	

BEST AVAILABLE COPY

**APPLICATION AS FILED - PART 1**

Apparition of Doctor Number  
09919069

(Column 1)		(Column 2)		OTHER THAN SMALL ENTITY	
FOR	MURKIN FEE	MURKIN FEE	SMALL ENTITY	OR	SMALL ENTITY
BASIC FEE (37 CFR 1.161(b) & (c))	N/A	N/A	RAF 101	RAF 101	RAF 101
SEARCH FEE (37 CFR 1.162, 1.163, 1.164)	N/A	N/A	N/A	N/A	N/A
EVALUATION FEE (37 CFR 1.164(b) & (c))	N/A	N/A	N/A	N/A	N/A
<b>TOTAL CLAIMS</b>					
(37 CFR 1.161)					
INDEPENDENT CLAIMS					
(37 CFR 1.161)					
APPLICATION SIZE FEE (37 CFR 1.163)	if the specification and drawings exceed 100 sheets of paper, the application size fee due is \$280 (\$120 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 11(f)(1)(K) and 37 CFR 5.19(a).	EX 26	X100	OR	X580
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 3.1(d))					X200
* If the difference in column 1 is less than zero, enter "0" in column 2.		4800			3600
APPLICATION AS ALLOWED		TOTAL			TOTAL

\* If the difference in column 1 is not the zero, write '0' in column 2.

**APPLICATION AS AMENDED - PART II**

AMENDMENT A		AMENDMENT B		AMENDMENT C		AMENDMENT D	
AMENDMENT A		AMENDMENT B		AMENDMENT C		AMENDMENT D	
3/16/88		CLASSIS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PREDENT EXTRA	
Total SIC 11100 Expenditure Work (Line)	28	MEMS	24	4			
Application SIC 1100 (27 CFR 1.16(e))			3	1			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1.16(e))							
TOTAL ADD'L FEE 200.90							
TOTAL ADD'L FEE 200.90							

(Column 1) CLAIMS PENDING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY SAID FOR	(Column 3) PRESENT EXTRA
Total claims	28	Minutes	28
Expenditure over claim	4	Minutes	4
Application filed 14-9-1971-CFR 1,1000			
FEE FOR PREPARATION OF MULTIPLE DEPENDENT CLAIM (CFR 1.146)			
<p>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>If the Highest Number Previously Paid For by TMA is \$100 or less than 20, column "20".</p> <p>If the Highest Number Previously Paid For by TMA is \$100 or more than 20, column "20".</p> <p>If the Highest Number Previously Paid For by TMA or Interim is \$100 or less than 3, enter "0".</p> <p>The Highest Number Previously Paid For (Total or Interim) is the Highest amount listed in the respective box in column 1.</p> <p>A collection of information is required by 37 CFR 1.16. This information is required to obtain or retain a license to practice before the USPTO.</p>			
RATE (1)		ADDITIONAL FEE (2)	
X\$ 25		OR X\$50	
X100		OR X\$100	
		OR 400	
+100		OR 450	
TOTAL ADDL FEE		TOTAL ADDL FEE	

• If the entry in column 1 is less than the entry in column 2

29. If the Standard Number Previously Paid For, Enter "0" in column 2, and "0" in column 3.

THE 100TH NUMBER PREVIOUSLY PRINTED FOR IN THIS SPACE IS NO. 20, 000.

A collection of information is required by § 37.1-1.1 of the Virginia Code. The information is used for the purpose of determining the amount of the tax.

If you need assistance in completing the form, call 1-800-CPD-9190 and ask for option 2.

**BEST AVAILABLE COPY**